

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>me</i>		05/23/01
O.I.P.E. CLASSIFIER		43	5/22/01
FORMALITY REVIEW	CV	503	06-22-01
RESPONSE FORMALITY REVIEW	Tequest	925	10-05-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	3/23/04
2	3/23/04
3	3/23/04
4	3/23/04
5	3/23/04
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49	3/23/04
50	3/23/04

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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